



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

July 19, 2018

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

John Thomas Viti, Esq.
Bureau of Professional Medical Conduct
NYS Department of Health
90 Church Street
New York, New York 10007

Muneer Imam, M.D.
2 Union Avenue
Center Moriches, New York 11934

Patrick J. Engle, Esq.
Keller, O'Reilly & Watson
242 Crossways Park West
Woodbury, New York 11797

RE: In the Matter of Muneer Imam, M.D.

Dear Parties:

Enclosed please find the Determination and Order (No.18-164) of the Hearing Committee in the above referenced matter. This Determination and Order shall be deemed effective upon the receipt or seven (7) days after mailing by certified mail as per the provisions of §230, subdivision 10, paragraph (h) of the New York State Public Health Law.

As prescribed by the New York State Public Health Law §230, subdivision 10, paragraph (i), (McKinney Supp. 2015) and §230-c subdivisions 1 through 5, (McKinney Supp. 2015), "the determination of a committee on professional medical conduct may be reviewed by the Administrative Review Board for professional medical conduct." Either the Respondent or the Department may seek a review of a committee determination.

All notices of review must be served, by certified mail, upon the Administrative Review Board and the adverse party within fourteen (14) days of service and receipt of the enclosed Determination and Order.

The notice of review served on the Administrative Review Board should be forwarded to:

James F. Horan, Esq., Chief Administrative Law Judge
New York State Department of Health
Bureau of Adjudication
Riverview Center
150 Broadway – Suite 510
Albany, New York 12204

The parties shall have 30 days from the notice of appeal in which to file their briefs to the Administrative Review Board.

Six copies of all papers must also be sent to the attention of Mr. Horan at the above address and one copy to the other party. The stipulated record in this matter shall consist of the official hearing transcript(s) and all documents in evidence.

Parties will be notified by mail of the Administrative Review Board's Determination and Order.

Sincerely,



James F. Horan
Chief Administrative Law Judge
Bureau of Adjudication

JFH: cac
Enclosure

STATE OF NEW YORK : DEPARTMENT OF HEALTH
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

COPY

-----X
IN THE MATTER :
OF :
MUNEER IMAM, M.D. :
-----X

DETERMINATION
AND
ORDER

18-164

Following an investigation, the Director of the Office of Professional Medical Conduct, New York State Health Department, ("OPMC" or "Department") determined that MUNEER IMAM, M.D. ("Respondent") violated the terms of probation imposed by BPMC Order No. 16-113. In a Violation of Probation Letter dated June 15, 2017, the OPMC Director provided Respondent with a notice of the facts forming the basis for this determination and advised Respondent that he had the right to a hearing. By letter dated June 29, 2017, Respondent disputed three of the fourteen factual allegations and requested a hearing. Therefore, a Notice of Violation of Probation Proceeding dated October 4, 2017, was served upon Respondent. THOMAS T. LEE, M.D., Chairperson, ELISA J. WU, M.D., and RICHARD S. GOLDBERG, ESQ., duly designated members of the State Board for Professional Medical Conduct, served as the Hearing Committee in this matter pursuant to § 230(10)(e) of the Public Health Law of the State of New York ("Public Health Law"). Administrative Law Judge ("ALJ") WILLIAM J. LYNCH, ESQ., served as the Administrative Officer.

The Department appeared by RICHARD J. ZAHNLEUTER, General Counsel, by JOHN THOMAS VITI, ESQ., of Counsel. Respondent was represented by PATRICK J. ENGLE, ESQ., and SCOTT C. WATSON, ESQ. Evidence was received, witnesses sworn and heard, and transcripts of the proceedings were made.

After consideration of the entire record, the Hearing Committee issues this Determination and Order.

PROCEDURAL HISTORY

Pre-Hearing Conferences:	October 24, 2017 November 15, 2017
Hearing Dates:	November 15, 2017 March 28, 2018
Witness for the Department:	Annette Palk
Witness for Respondent:	Muneer Imam, M.D.
Written Submissions Received:	May 15, 2018
Deliberations Held:	June 14, 2018

STATEMENT OF CASE

The Department charged Respondent with twenty specifications of professional misconduct, as defined in § 6530(29) of the Education Law of the State of New York ("Education Law"), in that Respondent allegedly violated terms of probation imposed pursuant to Public Health Law § 230. A copy of the Violation of Probation Letter is attached to this Determination and Order as Appendix I.

FINDINGS OF FACT

The following Findings of Fact were made after a review of the entire record in this matter. All findings and conclusions set forth below are the unanimous determinations of the Hearing Committee unless otherwise indicated. Conflicting evidence, if any, was considered and rejected in favor of the cited evidence. Numbers below in parentheses refer to exhibits (denoted by the prefix "Ex.") or transcript page numbers ("T."). These citations refer to evidence found persuasive by the Hearing Committee in arriving at a particular finding.

Having heard the testimony and considered the documentary evidence presented by the Department and Respondent, the Hearing Committee makes the following findings of fact:

1. Respondent was authorized to practice medicine in New York State on July 30, 1984, by the issuance of license number 159557. (Dept. Ex. 21).
2. In approximately April 2016, the State Board for Professional Medical Conduct ("Board") charged Respondent with professional misconduct. Rather than proceed with a hearing on the charges, Respondent admitted in a Consent Agreement that he could not successfully defend against at least one of the acts of misconduct, and he stipulated to the imposition of a license suspension for 36 months, with the entire period of suspension to be stayed, and probation for a period of 36 months subject to terms set forth in an attachment to the Consent Agreement. The probation terms included practicing medicine

only when monitored by a licensed physician, board certified in an appropriate specialty ("practice monitor"), maintaining a mandated level of malpractice insurance, and completing a continuing medical education program. Respondent was represented by an attorney when he signed the Consent Agreement. (Dept. Ex. 1, pp. 12-23).

3. The Board issued an Order on April 5, 2016, adopting the Consent Agreement ("Board Order"). The Board Order became effective on April 12, 2016. The probation terms requiring Respondent to have a practice monitor and to maintain a mandated level of malpractice insurance became effective thirty days later, May 12, 2016. (Dept. Ex. 1, pp. 10-11).

4. On approximately April 8, 2016, the Department's Physician Monitoring Program sent a letter to Respondent at his home address advising him that he was required, upon receipt, to contact Karen Colson, a nurse investigator consultant, to schedule a meeting. The letter further instructed Respondent to complete and return a data sheet within 15 days of receipt, and reminded Respondent of the practice monitor requirement during his probation. (Dept. Ex. 6, 9; T. 21-22, 175).

5. Respondent did not contact the Physician Monitoring Program as instructed. On May 6, 2016, Ms. Colson telephoned Respondent, and Respondent asked Ms. Colson to send a copy of the letter to a different address. Ms. Colson sent a second copy of the letter to Respondent that same day. (Dept. Ex. 7; T. 23-26, 175-176).

6. Respondent did not respond to the second copy of the letter that the Physician Monitoring Program sent him. (T. 26-27).

7. In August 2016, the matter was assigned to Annette Palk, a supervising medical conduct investigator in the Physician Monitoring Program. (T. 11, 17).

8. On August 24, 2016, Ms. Palk sent a letter to Respondent advising him that he was in violation of BPMC Order No. 16-113 because he had not provided requested documents, had not met with the designated person in the Physician Monitoring Program, and had not obtained approval of a practice monitor. The letter instructed Respondent to call Ms. Palk upon receipt, and that failure to comply would result in his case being referred for further disciplinary action. (Dept. Ex. 8; T. 27-29).

9. Respondent did not telephone Ms. Palk. (T.29).

10. It was not until September 19, 2016, that Ms. Palk received a completed data sheet from Respondent. (Dept. Ex. 9; T. 29).

11. It was not until October 4, 2016, that Ms. Palk received a form completed by a physician (Dr. Abrar) who was proposed as Respondent's practice monitor. OPMC did not approve Dr. Abrar as Respondent's practice monitor because Dr. Abrar withdrew, stating that he was nearing retirement and decided that he did not want to take on the responsibility of monitoring a physician. (T. 49, 163, 177).

12. On approximately November 16, 2016, Ms. Palk sent Respondent a letter advising him that her office was investigating his failure to comply with the Consent Order, and offered him an opportunity to be

interviewed. Ms. Palk instructed Respondent to call her no later than December 7, 2016, to schedule the interview or decline the opportunity for the interview. (Dept. Ex. 10; T. 31).

13. On November 21, 2016, Ms. Palk had a conversation with Respondent in which he admitted that he had received the letter offering an opportunity to be interviewed, but he told Ms. Palk that he had not yet decided whether he would be engaging an attorney. (Dept. Ex. 12; T. 33-35, 55).

14. As of December 16, 2016, Respondent had still not contacted Ms. Palk so she sent Respondent a letter advising him that his failure to schedule an interview was being deemed a declination of that opportunity. (Dept. Ex. 12; T. 35-37).

15. Respondent proposed Rajesh Patel, M.D. as his practice monitor, but OPMC did not approve Dr. Patel because the probation terms required that the practice monitor be certified in an appropriate specialty, and Dr. Patel's board certification lapsed. (Dept. Ex. 13; T. 66, 132, 166, 179).

16. Respondent proposed James Halper, M.D. as a practice monitor, but OPMC did not approve Dr. Halper because the probation terms required that the practice monitor be certified in an appropriate specialty. Respondent practiced internal medicine and/or pulmonary disease, but Dr. Halper was a psychiatrist (Dept. Ex 14: T. 52-55, 166, 180).

17. Respondent practiced medicine during the months of May, June July, August, September, October, November and December 2016, and

January 2017. He did not have an approved practice monitor or excess medical malpractice insurance these months. (Dept. Ex. 1, pp. 16-80 and 81-83; T. 207).

18. Respondent had scheduled a meeting with Ms. Palk for a date in March 2017, but Respondent called and asked to reschedule the meeting. (T. 123, 129).

19. Respondent did not obtain the excess medical malpractice insurance required by the probation terms until April 20, 2017. (Dept. Ex. 4, 5; T. 133).

20. Respondent proposed Larry Walser, M.D., and OPMC approved Dr. Walser in May 2017. (Respondent Ex. B; T. 43, 167).

21. Respondent finally met with Ms. Palk on May 4, 2017, for the meeting which the Physician Monitoring Program had first requested in its April 8, 2016 letter. (Dept. Ex. 18; T. 97-99, 104-105).

22. On May 9, 2017, Ms. Palk advised Respondent that he was now in compliance with the terms of probation and could resume the practice of medicine. (Respondent Ex. B; T. 74-75).

DISCUSSION

The Department provided the testimony of Annette Palk who is the supervising medical conduct investigator in OPMC's Physician Monitoring Program who was assigned to the matter of Respondent's compliance with the Board Order. The Hearing Committee found Ms. Palk to be a credible

witness who established that OPMC made repeated attempts to obtain Respondent cooperation in meeting the requirements of the Board Order.

Respondent testified on his own behalf and called no other witnesses. The Hearing Committee considered and rejected Respondent's various attempts to shift responsibility for his noncompliance with the Board Order to OPMC. Respondent initially claimed that the Board Order allowed him to continue practicing medicine as long as he proposed and sought OPMC's approval of a practice monitor within 30 days of the Board Order. (T. 189). Later in his testimony, Respondent stated that there were no time limits with respect to his compliance with the terms of probation. (T. 191-192). However, the plain language of the probation terms states that, within 30 days of the Consent Order's effective date, Respondent shall practice medicine only when monitored by a practice monitor. During cross examination by a panel member, Respondent finally admitted that the requirements for a practice monitor and excess coverage needed to be met within 30 days of the effective date of the Consent Order. (T. 212).

Respondent contended that his previous attorney, Anthony Z. Scher, thought that Respondent was permitted to practice medicine while attempting to satisfy the terms of probation. In support of this claim, Respondent points to a letter written by Mr. Scher for Respondent's signature in June 2016, addressed to Medicare which explained that Respondent's license had not been suspended. While it is true that the letter does state that Respondent was not be suspended and could

continue to practice, the letter does not support the claim that Mr. Scher thought that Respondent could continue practicing without meeting the terms and conditions of his probation.

Respondent's claim related to Mr. Scher's alleged understanding that Respondent could continue practicing medicine was also inconsistent with Respondent's later testimony about a telephone conversation with Mr. Scher in January 2017. When Respondent admitted to Mr. Scher that he was in his medical office during that conversation, Mr. Scher stated "What are you doing in your office?" Mr. Scher's expression of apparent surprise demonstrates that Respondent should not have been seeing patients while he did not have a practice monitor in place. (T. 182). Moreover, Respondent offered no reason for his failure to call Mr. Scher as a witness if he intended to prove Mr. Scher's misunderstanding of the Consent Agreement.

Respondent also contended that his inability to satisfy the practice monitor requirement rose to the level of impossibility of performance so his failure to comply with the probation terms should be excused. Respondent's testimony, however, demonstrated that Respondent made little effort during the six months following his signing of the Consent Agreement on March 28, 2016. In fact, Respondent admitted that he only talked to seven or eight physicians during the six-month period before proposing a monitor on October 4, 2016. (T. 163). The Hearing Committee recognized that identifying a practice monitor may well be a difficult task, but determined that Respondent had failed to demonstrate

even a good faith effort to comply with this requirement. Respondent also disregarded simple requests of the Physician Monitoring that were entirely within Respondent's control such as the submission of a data form.

OPMC's Physician Monitoring Unit provided Respondent with an opportunity to meet and discuss the Consent Agreement before the Board's Order became effective, but Respondent failed to take advantage of this opportunity. In his testimony, he admitted that he was supposed to have a meeting with the Department around the time that he first entered into the consent agreement, but he claimed that he read somewhere that he needed to provide proof for the requirements of the probation terms before that meeting occurred (T. 169). However, he failed to produce the document that allegedly led him to ignore repeated written instructions to arrange a meeting with the Physician Monitoring Program.

Respondent attempted to persuade the Hearing Committee that OPMC had failed to adequately communicate with him and that certain issues were beyond his control. However, the Hearing Committee found that Respondent was aware of the requirements of the Board Order and yet failed to comply even with conditions and instructions that he could have easily accomplished. In mitigation for his failure to accomplish some of these tasks, Respondent stated that his wife was diagnosed with Parkinson's disease, and he accompanied her for treatments and doctor appointments. (T. 172). While this circumstance might justify some

delay, Respondent showed a near total disregard for the requests and instructions of the Physician Monitoring Unit.

CONCLUSIONS OF LAW

As required by PHL § 230(10)(f), the Hearing Committee based its conclusions on whether the Department met its burden of establishing the allegations contained in the Statement of Charges by a preponderance of the evidence. When the evidence was equally balanced or left the Hearing Committee in such doubt as to be unable to decide a controversy either way, then the judgment went against the Department (See Prince, Richardson on Evidence § 3-206).

The Twenty Specifications charged Respondent with professional misconduct as defined in § 6530(29) of the Education Law by violating a term or condition of probation imposed pursuant to § 230 of the Public Health Law. Having considered the complete record in this matter, the Hearing Committee concludes that the Department has established that Respondent failed to comply with the terms of probation in the Board Order and sustains eighteen of the twenty specifications of misconduct set forth in the determination made by the Director of the Office of Professional Medical Conduct.

In the First through Tenth Specifications, the Department charges Respondent with violating the paragraph eight of his probation terms which provided that he "shall practice medicine only when monitored by a licensed physician, board certified in an appropriate specialty,

("practice monitor") proposed by Respondent and subject to the written approval of OPMC." In the Eleventh through Twentieth Specifications, the Department charges Respondent with violating paragraph eight(d) of his probation terms which required him to "maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and 46 million per policy year." The Hearing Committee sustains the First through Ninth and Eleventh through Nineteenth Specifications which relate to Respondent's unauthorized practice of medicine and failure to maintain the required insurance coverage for each of the nine months from May 2016 through January 2017. The Hearing Committee dismisses the Tenth and Twentieth Specifications because they both state that they are based in part on a factual allegation 2j, but the Violation of Probation Letter does not contain a factual allegation 2j.

DETERMINATION AS TO PENALTY

The Hearing Committee considered the full spectrum of penalties available pursuant to statute, including revocation, suspension, probation, censure, and the imposition of civil penalties. In determining the penalty, the Committee considered both the violation of probation and the prior adjudication of misconduct.

After the Hearing Committee had made its factual findings and conclusions on the specifications of misconduct, it was provided with a copy of a prior Hearing Committee from 1993, which found Respondent guilty of careless practice, lack of attention to detail and failure to

appreciate the severity of patient illness. (Dept. Ex. P-1, P-2). As a penalty in that proceeding, Respondent was placed on probation and required to undergo re-training. In the 2016 Consent Agreement, Respondent admitted that he could not successfully defend against at least one of the acts of misconduct charged against him. The factual allegations merely stated that Respondent failed [to] render or note appropriate evaluation of patients for whom he prescribed controlled substances, and the specifications charged him with negligence on more than one occasion and failure to maintain records. Based on these underlying charges, the Hearing Committee decided revocation of Respondent's medical license was too severe a penalty because there was no evidence of patient harm.

The Hearing Committee, however, recognized that Respondent's disregard of the Board Order demeans the process intended to protect his patients. When Respondent was faced with charges of misconduct, the Department allowed him to continue the practice of medicine because he agreed to comply terms and conditions. Instead of using that opportunity, Respondent ignored the Department's attempts to meet with him and disregarded the terms and conditions imposed upon him. At the hearing, Respondent then blamed the Department for his noncompliance. Therefore, a significant penalty must be imposed including an actual suspension of Respondent's license for a period of six months, a civil penalty of \$18,000, and a requirement that Respondent complete a new

three-year period of probation under the same terms and conditions as those contained in the Consent Agreement.

ORDER

Based upon the foregoing, IT IS HEREBY ORDERED THAT:

1. The First through Ninth and Eleventh through Nineteenth Specifications of professional misconduct, as set forth in the Violation of Probation Letter issued by the Director of OPMC, are SUSTAINED;
2. The Tenth and Twentieth Specifications are DISMISSED;
3. Respondent's license to practice medicine is wholly SUSPENDED for a period of six months;
4. Following the six-month actual suspension, Respondent is placed on probation for a period of three years and shall abide by the terms of probation annexed as attachment A;
5. During the period of probation, Respondent shall practice medicine only when monitored by a licensed physician as detailed in paragraph eight of Attachment A;
6. A civil penalty of \$18,000.00 is assessed which is payable within sixty (60) days of the effective date of this Order.
7. Any civil penalty not paid by that date shall be subject to all provisions of law relating to debt collection by the State of New York. This includes but is not limited to the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non-renewal of

permits or licenses [Tax Law section 171(27); State Finance Law section 18; CPLR section 5001; Executive Law section 32. Payments must be submitted to:

Bureau of Accounts Management
Revenue Unit, Room 2748
New York State Department of Health
Empire State Plaza, Corning Tower
Albany, New York 12237

8. This Determination and Order shall be effective upon service. Service shall be either by certified mail upon Respondent at his last known address and such service shall be effective upon receipt or seven days after mailing, whichever is earlier, or by personal service and such service shall be effective upon receipt.

DATED: New York, New York
July 18, 2018


THOMAS T. LEE, M.D. (CHAIR)

ELISA J. WU, M.D.
RICHARD S. GOLDBERG, ESQ.

TO: John Thomas Viti, Esq.
Associate Counsel
Bureau of Professional Medical Conduct
NYS Department of Health
90 Church Street
New York, New York 10007

Patrick J. Engle, Esq.
Keller, O'Reilly & Watson, P.C.
242 Crossways Park West
Woodbury, New York 11797

Muneer Imam, M.D.
2 Union Avenue
Center Moriches, New York 11934

ATTACHMENT A

Terms of Probation

1. Respondent's conduct shall conform to moral and professional standards of conduct and governing law. Any act of professional misconduct by Respondent as defined by N.Y. Educ. Law §§ 6530 or 6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to N.Y. Pub. Health Law § 230(19).
2. Respondent shall cooperate fully with and respond in a timely manner to OPMC requests to provide written periodic verification of his compliance with these terms. Upon the Director of OPMC's request, Respondent shall meet in person with the Director's designee.
3. Respondent's failure to pay any monetary penalty by the prescribed date shall subject the Respondent to all provisions of law relating to debt collection by New York State, including but not limited to: the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non-renewal of permits or licenses [ax las § 171(27); State Finance Law S 18; CPLR S 5001; Executive Law 32].
4. The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of 30 consecutive days or more. Respondent shall notify the Director of OPMC, in writing, if she is not currently engaged in, or intends to leave, active medical practice in New York State for a consecutive 30 day period. Respondent shall then notify the Director again at least 14 days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period shall resume and Respondent shall fulfill any unfulfilled probation terms and such additional requirements as the Director may impose as reasonably relate to the matters set forth in the Determination and Order or as are necessary to protect the public health.
5. The Director of OPMC may review Respondent's professional performance. This review may include but shall not be limited to: a review of office records, patient records, hospital charts, and/or electronic records; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.
6. Respondent shall maintain complete and legible medical records that accurately reflect the evaluation and treatment of patients and contain all information required by State rules and regulations concerning controlled substances.

7. Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204 with the following information, in writing, and ensure that this information is kept current: a full description of his employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; and all investigations, arrests, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility. Respondent shall notify OPMC, in writing, within 30 days of any additions to or changes in the required information.

8. During the probationary period, Respondent shall practice medicine only when monitored by a licensed physician, board certified in an appropriate specialty, ("practice monitor") proposed by Respondent and subject to the written approval of the Director of OPMC. Any medical practice in violation of this term shall constitute the unauthorized practice of medicine.

a. Respondent shall make available to the monitor any and all records or access to the practice requested by the monitor, including on-site observation. The practice monitor shall visit Respondent's medical practice at each and every location, on a random unannounced basis at least monthly and shall examine a selection (no fewer than 20) of records maintained by Respondent, including patient records, prescribing information and office records. The review will determine whether the Respondent's medical practice is conducted in accordance with the generally accepted standards of professional medical care. Any perceived deviation of accepted standards of medical care or refusal to cooperate with the monitor shall be reported within 24 hours to OPMC.

b. Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.

c. Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of OPMC.

d. Respondent shall maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with Section 230(18)(b) of the Public Health Law. Proof of coverage shall be submitted to the Director of OPMC within 30 days after the effective date of this Order.

9. Respondent shall comply with these probationary terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or a violation of, these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding, and/or any other such proceeding authorized by law, against Respondent.

APPENDIX I



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

CERTIFIED MAIL # 7017 0660 0001 1241 7517

June 15, 2017

Muneer Imam, M.D.
2 Union Avenue
Center Moriches, NY 11934

RE: VIOLATION OF PROBATION
Order BPMC # 16-113

Dear Dr. Imam:

After an investigation pursuant to N.Y. Public Health Law Section 230(19) I have determined, in my capacity as Director of the Office of Professional Medical Conduct (OPMC) of the New York State Department of Health, that you, Probationer, have violated the terms of probation imposed upon you by Order BPMC # 16-113, effective April 12, 2016. (A copy of Order BPMC # 16-113 is attached and marked as "Appendix A.") This letter initiates a violation of probation proceeding against you pursuant to N.Y. Public Health Law Section 230(19).

My determination that you have committed each of the specified probation violations is based on one or more of the facts enumerated in "Appendix B" and as cited below in each Specification of Probation Violation. You may dispute or admit each enumerated fact by placing your signature or initials next to it, in the appropriate space.

Please take notice that if you do not dispute the facts forming the basis of my determination of probation violation within 20 calendar days of the date of this letter, I shall submit this matter, and the undisputed facts set forth directly to a committee on professional conduct for its review and determination.

SPECIFICATIONS OF PROBATION VIOLATION

FIRST THROUGH TENTH SPECIFICATIONS

Probationer is charged with violating probation by practicing medicine without an approved practice monitor in violation of probation as set forth in:

1. Paragraphs 1, 1.a., 1.a.i., 2., and 2.a.
2. Paragraphs 1, 1.a., 1.a.i., 2., and 2.b.

(6)

3. Paragraphs 1, 1.a., 1.a.l., 2., and 2.c.
4. Paragraphs 1, 1.a., 1.a.l., 2., and 2.d.
5. Paragraphs 1, 1.a., 1.a.l., 2., and 2.e.
6. Paragraphs 1, 1.a., 1.a.l., 2., and 2.f.
7. Paragraphs 1, 1.a., 1.a.l., 2., and 2.g.
8. Paragraphs 1, 1.a., 1.a.l., 2., and 2.h.
9. Paragraphs 1, 1.a., 1.a.l., 2., and 2.i.
10. Paragraphs 1, 1.a., 1.a.l., 2., and 2.j.

ELEVENTH THROUGH TWENTIETH SPECIFICATIONS

Probationer is charged with violating probation by practicing medicine without required malpractice coverage as set forth in:

11. Paragraphs 1, 1.b., 1.b.l., 2., and 2.a.
12. Paragraphs 1, 1.b., 1.b.l., 2., and 2.b.
13. Paragraphs 1, 1.b., 1.b.l., 2., and 2.c.
14. Paragraphs 1, 1.b., 1.b.l., 2., and 2.d.
15. Paragraphs 1, 1.b., 1.b.l., 2., and 2.e.
16. Paragraphs 1, 1.b., 1.b.l., 2., and 2.f.
17. Paragraphs 1, 1.b., 1.b.l., 2., and 2.g.
18. Paragraphs 1, 1.b., 1.b.l., 2., and 2.h.
19. Paragraphs 1, 1.b., 1.b.l., 2., and 2.i.
20. Paragraphs 1, 1.b., 1.b.l., 2., and 2.j.

Please be advised that you have a right to a hearing to contest my determination that you have violated your probation, and you have the right to be represented by counsel. If you elect to dispute the facts forming the basis of my determination, you must return the fully executed Appendix B setting forth the facts you specifically deny, as well as those you admit, within 20 calendar days of the date of this letter, to: Keith W. Servis, Director, Office of Professional Medical Conduct, Riverview Center, 150 Broadway Suite 355, Albany, NY 12204-2719. You shall be afforded a hearing before a committee on professional conduct, which will hear the matter and make findings of fact, conclusions of law and a determination. A stenographic record will be made of the hearing. The committee, after providing you with an opportunity to be heard, shall determine whether you have violated probation and shall impose an appropriate penalty, from among those set forth in N.Y. Public Health Law Section 230-a; these include: a Censure and Reprimand, Suspension of License, Limitation of License, Revocation of License, a Fine, a Course of Education or Training, and/or Public Service. In determining the appropriate

(7)

penalty, the committee shall consider both the violation of probation and the prior adjudication of misconduct against you. The chairperson of the committee shall issue an order adopting the decision of the committee on professional conduct. The order may be reviewed by the Administrative Review Board for Professional Medical Conduct.

Please be on notice that, should you not dispute the facts forming the basis of my determination within 20 calendar days of the date of this letter, or if my determination that you have violated your probation is sustained by a committee on professional conduct after a hearing, the Board may, among other things, revoke or suspend your license, issue a Censure and Reprimand, impose probation, and order payment of a substantial fine. Given the seriousness of these proceedings, I urge you to consult an attorney immediately.

Very truly yours,

Keith W. Servis
Director
Office of Professional Medical Conduct

cc: Scott C. Watson, Esq.
Keller, O'Reilly, & Watson, P.C.
242 Crossways Park West
Woodbury, NY 11797
(516) 496-1919
SWatson@kowlaw.com

APPENDIX A



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

April 5, 2016

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Muneer Imam, M.D.
2 Union Avenue
Center Moriches, New York 11934

Re: License No. 159557

Dear Dr. Imam:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 16-113. This order and any penalty provided therein goes into effect April 12, 2016.

Please direct any questions to: Board for Professional Medical Conduct, 90 Church Street, 4th Floor, New York, NY 10007-2919, telephone # 212-417-4445.

Sincerely,

[Redacted]
Katherine A. Hawkins, M.D., J.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: Anthony Z. Scher, Esq.
800 Westchester Avenue, Suite N641
Rye Brook, New York 10573

(10)

NEW YORK STATE
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

DEPARTMENT OF HEALTH

BPMC No. 16-113

IN THE MATTER
OF
MUNEER IMAM, M.D.

CONSENT
ORDER

Upon the application of MUNEER IMAM, M.D., in the attached Consent Agreement and Order, which is made a part of this Consent Order, it is

ORDERED, that the Consent Agreement, and its terms, are adopted

and it is further

ORDERED, that this Consent Order shall be effective upon issuance by the Board,
either

by mailing of a copy of this Consent Order, either by first class mail to Respondent at
the address in the attached Consent Agreement or by certified mail to Respondent's
attorney, OR

Upon facsimile or email transmission to Respondent or Respondent's attorney,
whichever is first.

SO ORDERED.

DATE: 4/5/2016

Arthur S. Hengerer, M.D.
Chair
State Board for Professional Medical Conduct

11

1

NEW YORK STATE DEPARTMENT OF HEALTH
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

IN THE MATTER
OF
MUNEER IMAM, M.D.

CONSENT
AGREEMENT

MUNEER IMAM, M.D., represents that all of the following statements are true:

That on or about July 30, 1984 I was licensed to practice as a physician in the State of New York, and issued License No. 159557 by the New York State Education Department.

My current address is 2 Union Ave. Center Moriches, NY 11934, and I will advise the Director of the Office of Professional Medical Conduct of any change of address.

I understand that the New York State Board for Professional Medical Conduct (Board) has charged me with one or more specifications of professional misconduct, as set forth in a Statement of Charges, marked as Exhibit "A", attached to and part of this Consent Agreement.

I assert that I cannot successfully defend against at least one of the acts of misconduct alleged, in full satisfaction of the charges against me, and agree to the following penalty:

(12)

- Pursuant to Pub. Health Law Sec.230-a (2) my license to practice medicine in New York shall be suspended for 36 months, with the entire period of suspension to be stayed.
- Pursuant to NY Pub. Health Law Sec. 230-a(9) I shall be placed on probation for a period of 36 months subject to the terms set forth in attached Exhibit "B"

I further agree that the Consent Order shall impose the following conditions:

That Respondent shall comply with each and every penalty imposed by this Order pursuant to N.Y. Pub. Health Law § 230-a.

That Respondent shall remain in continuous compliance with all requirements of N.Y. Educ Law § 6502 including but not limited to the requirements that a licensee shall register and continue to be registered with the New York State Education Department (except during periods of actual suspension) and that a licensee shall pay all registration fees. Respondent shall not exercise the option provided in N.Y. Educ. Law § 6502(4) to avoid registration and payment of fees. This condition shall take effect 120 days after the Consent Order's effective date and will continue so long as Respondent remains a licensee in New York State; and

That Respondent shall remain in continuous compliance with all requirements of N.Y. Pub. Health Law § 2995-a(4) and 10 NYCRR 1000.5, including but not limited to the requirements that a licensee shall report to

(13)

the department all information required by the Department to develop a public physician profile for the licensee; continue to notify the department of any change in profile information within 30 days of any change (or in the case of optional information, within 365 days of such change); and, in addition to such periodic reports and notification of any changes, update his or her profile information within six months prior to the expiration date of the licensee's registration period. Licensee shall submit changes to his or her physician profile information either electronically using the department's secure web site or on forms prescribed by the department, and licensee shall attest to the truthfulness, completeness and correctness of any changes licensee submits to the department. This condition shall take effect 30 days after the Order's effective date and shall continue so long as Respondent remains a licensee in New York State. Respondent's failure to comply with this condition, if proven and found at a hearing pursuant to N.Y. Pub. Health Law § 230, shall constitute professional misconduct as defined in N.Y. Educ. Law § 6530(21) and N.Y. Educ. Law § 6530(29). Potential penalties for failure to comply with this condition may include all penalties for professional misconduct set forth in N.Y. Pub. Health Law §230-a, including but not limited to: revocation or suspension of license, Censure and Reprimand, probation, public service and/or fines of up to \$10,000 per specification of misconduct found; and

That Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204-2719, with the following information, in writing, and ensure that this information is kept current: a full description of Respondent's employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; and all investigations, arrests, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility. Respondent shall notify OPMC, in writing, within 30 days of any additions to or changes in the required information. This condition shall take effect 30 days after the Order's effective date and shall continue at all times until Respondent receives written notification from the Office of Professional Medical Conduct, Physician Monitoring Program, that OPMC has determined that Respondent has fully complied with and satisfied the requirements of the Order, regardless of tolling; and

That Respondent shall cooperate fully with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Consent Order and in its investigations of matters concerning Respondent. Respondent shall respond in a timely manner to all OPMC requests for written periodic verification of Respondent's compliance with this Consent Order. Respondent shall meet with a person designated by the Director of OPMC,

(15)

as directed. Respondent shall respond promptly and provide all documents and information within Respondent's control, as directed. This condition shall take effect upon the Board's issuance of the Consent Order and will continue so long as Respondent remains licensed in New York State.

I stipulate that my failure to comply with any conditions of this Consent Order shall constitute misconduct as defined by N.Y. Educ. Law § 6530(29).

I agree that, if I am charged with professional misconduct in future, this Consent Agreement and Order shall be admitted into evidence in that proceeding.

I ask the Board to adopt this Consent Agreement.

I understand that if the Board does not adopt this Consent Agreement, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this Consent Agreement shall not be used against me in any way and shall be kept in strict confidence; and the Board's denial shall be without prejudice to the pending disciplinary proceeding and the Board's final determination pursuant to the N.Y. Pub. Health Law.

I agree that, if the Board adopts this Consent Agreement, the Chair of the Board shall issue a Consent Order in accordance with its terms. I agree that this Consent Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Consent Order by first class mail to me at the address in this Consent Agreement, or to my attorney by certified mail, OR upon facsimile transmission to me or my attorney, whichever is first.

The Consent Order, this agreement, and all attached Exhibits shall be public documents, with only patient identities, if any, redacted. As public documents, they may be posted on the Department's website. OPMC shall report this action to the National Practitioner Data Bank and the Federation of State Medical Boards, and any other entities that the Director of OPMC shall deem appropriate.

I stipulate that the proposed sanction and Consent Order are authorized by N.Y. Pub. Health Law §§ 230 and 230-a, and that the Board and OPMC have the requisite powers to carry out all included terms. I ask the Board to adopt this Consent Agreement of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's adoption of this Consent Agreement, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive my right to contest the Consent Order for which I apply, whether administratively or judicially, I agree to be bound by the Consent Order, and I ask that the Board adopt this Consent Agreement.

I understand and agree that the attorney for the Department, the Director of OPMC and the Chair of the Board each retain complete discretion either to enter into the proposed agreement and Consent Order, based upon my application, or to decline to do so. I further understand and agree that no prior or separate written or oral communication can limit that discretion.

(11)

DATE 3/28/2016

MUNEER IMAM, M.D.
Respondent

(18)

The undersigned agree to Respondent's attached Consent Agreement and to its proposed penalty, terms and conditions.

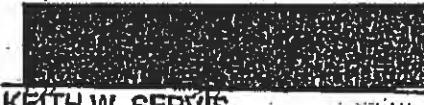
DATE: 4/1/2016


ANTHONY SCHER, ESQ.
Attorney for Respondent

DATE: 4/4/2016


JEAN BRESLER
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 4/4/16


KEITH W. SERVIS
Director
Office of Professional Medical Conduct

(19)

EXHIBIT "A"

NEW YORK STATE DEPARTMENT OF HEALTH
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

IN THE MATTER

OF

MUNEER IMAM, M.D.

STATEMENT
OF
CHARGES

MUNEER IMAM, M.D., the Respondent, was authorized to practice medicine in New York State on or about July 30, 1984, by the issuance of license number 159557 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. Between in or about 2006 and 2013 Respondent failed render or note appropriate care and or treatment to patients identified in Appendix A and failed to render or note appropriate evaluation of patients for whom he prescribed controlled substances.

SPECIFICATION OF CHARGESFIRST SPECIFICATIONNEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law Sec. 6530(3) by practicing the profession of medicine with negligence on more than one occasion as alleged in the facts of

1. Paragraph A.

20

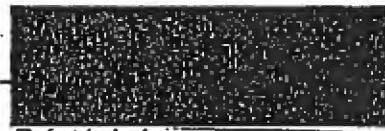
FAILURE TO MAINTAIN RECORDS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(32) by failing to maintain a record for each patient which accurately reflects the evaluation and treatment of the patient, as alleged in the facts of:

2. Paragraph A.

Apri, 14

DATE: March , 2016
New York, New York



Rey Nathanson, Deputy Counsel
Bureau of Professional Medical Conduct

(21)

EXHIBIT "B"

Terms of Probation

- 1) Respondent's conduct shall conform to moral and professional standards of conduct and governing law. Any act of professional misconduct by Respondent as defined by N.Y. Educ. Law §§ 6530 or 6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to N.Y. Pub. Health Law § 230(19).
- 2) Respondent shall cooperate fully with, and respond in a timely manner to, OPMC requests to provide written periodic verification of Respondent's compliance with the terms of this Consent Order. Upon the Director of OPMC's request, Respondent shall meet in person with the Director's designee.
- 3) Respondent's failure to pay any monetary penalty by the prescribed date shall subject Respondent to all provisions of law relating to debt collection by New York State, including but not limited to: the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non-renewal of permits or licenses [Tax Law § 171(27); State Finance Law § 18; CPLR § 5001; Executive Law § 32].
- 4) The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of 30 consecutive days or more. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in, or intends to leave, active medical practice in New York State for a consecutive 30 day period. Respondent shall then notify the Director again at least 14 days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period shall resume and Respondent shall fulfill any unfulfilled probation terms and such additional requirements as the Director may impose as reasonably relate to the matters set forth in Exhibit "A" or as are necessary to protect the public health.
- 5) The Director of OPMC may review Respondent's professional performance. This review may include but shall not be limited to: a review of office records, patient records, hospital charts, and/or electronic records; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.
- 6) Respondent shall adhere to federal and state guidelines and professional standards of care with respect to infection control practices. Respondent shall ensure education, training and oversight of all office personnel involved in medical care, with respect to these practices.

- 7) Respondent shall maintain complete and legible medical records that accurately reflect the evaluation and treatment of patients and contain all information required by State rules and regulations concerning controlled substances.
- 8) Within thirty days of the Consent Order's effective date, Respondent shall practice medicine only when monitored by a licensed physician, board certified in an appropriate specialty, ("practice monitor") proposed by Respondent and subject to the written approval of the Director of OPMC. Any medical practice in violation of this term shall constitute the unauthorized practice of medicine.
 - a) Respondent shall make available to the monitor any and all records or access to the practice requested by the monitor, including on-site observation. The practice monitor shall visit Respondent's medical practice at each and every location, on a random unannounced basis at least monthly and shall examine a selection (no fewer than 20) of records maintained by Respondent, including patient records, prescribing information and office records. The review will determine whether the Respondent's medical practice is conducted in accordance with the generally accepted standards of professional medical care. Any perceived deviation of accepted standards of medical care or refusal to cooperate with the monitor shall be reported within 24 hours to OPMC.
 - b) Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.
 - c) Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of OPMC.
 - d) Respondent shall maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with Section 230(18)(b) of the Public Health Law. Proof of coverage shall be submitted to the Director of OPMC prior to Respondent's practice after the effective date of this Order.
- 9) Respondent shall enroll in and successfully complete a continuing education program in an area or areas as directed by OPMC. This continuing education program is subject to the Director of OPMC's prior written approval and shall be successfully completed within the first 90 days of the probation period.
- 10) Respondent shall comply with this Consent Order and all its terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or a violation of, these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding, and/or any other such proceeding authorized by law, against Respondent.

APPENDIX B

FACTS

1. Effective May 12, 2016, pursuant to Order BPMC # 16-113, Probationer was not permitted to practice medicine except in compliance with Paragraph 8, and its subparagraphs, of Exhibit B of Appendix A.

Admit Deny Licensee's initials

- a. Paragraph 8 requires Probationer to practice only when monitored by a licensed physician, board certified in an appropriate specialty, proposed by Respondent and subject to the written approval of the Director of OPMC.

Admit Deny Licensee's initials

- i. Probationer did not receive such written approval any earlier than March 2017 and was not monitored until then.

Admit Deny Licensee's initials

- b. Paragraph 8(d) required Probationer to maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with Section 230(18)(b) of the Public Health Law. That paragraph also required that proof of coverage be submitted to the Director of OPMC prior to the Probationer's practice after the effective date of Appendix A.

Admit Deny Licensee's initials

- i. Probationer did not maintain such coverage at any time prior to April 2017.

Admit Deny Licensee's initials

2. During the period May 12, 2016, through January 31, 2017, as more specifically set forth in the attached Controlled Substance Prescribing Detail, Probationer engaged in the practice of medicine in the State of New York on no fewer than:

- a. 125 occasions in May 2016;

Admit Deny Licensee's initials

(247)

- b. 195 occasions in June 2016;
Admit _____ Deny _____ Licensee's initials
- c. 195 occasions in July 2016;
Admit _____ Deny _____ Licensee's initials
- d. 195 occasions in August 2016;
Admit _____ Deny _____ Licensee's initials
- e. 185 occasions in September 2016;
Admit _____ Deny _____ Licensee's initials
- f. 280 occasions in October 2016;
Admit _____ Deny _____ Licensee's initials
- g. 255 occasions in November 2016;
Admit _____ Deny _____ Licensee's initials
- h. 210 occasions in December 2016;
Admit _____ Deny _____ Licensee's initials
- i. 135 occasions in January 2017.
Admit _____ Deny _____ Licensee's initials